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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application of Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	ENTITY	OR	_	R THAN ENTITY
FOR			NUMBE	R FILED	NUMBI	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))							ĺ	10112	\$	OR	10112	s
TOTAL CLAIMS			minus 20 = *					x \$ =	<u>'</u>	OR	x \$ =	
(37 CFR 1.16(c)) INDEPENDENT CLAIMS						•				-		
-	FR 1.16(b))	NT CLAIR	Tillius 5 -				l			OR		<u> </u>
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							1	+\$=		OR	_ + \$=	
* If ti	he difference in c	olumn 1	is less tha	n zero, er	nter "0" in column		TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II												
			mn 1)		(Column 2)	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		SMALL E	NTITY	OR	OTHER SMALL	
AMENDMENT A		REMA AF	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA]	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	9) (Minus	704	-	ľ	x \$=		OR	x s =	
	Independent (37 CFR 1,16(b))	٠	ţ	Minus	"56"	= /		× \$=		OR	x \$	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+s =/		OR	+# =	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Colui	mn 1)		(Column 2)	(Column 3)				,		
AMENDMENT B		CLA REMA AF	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	**	=		x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(b))	•		Minus	***	3		× \$ =		OR	x \$ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+s =		OR	+s =	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Colur	mn 1)		(Column 2)	(Column 3)	_					
AMENDMENT C		REMA AF	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	**	=		x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	•		Minus	***	=		× \$=		OR	x s=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION PER DETERMINATION RECORD	Application or Docket Number										
Effective January 1, 2003 .10 6 7/1/30											
CLAIMS AS FILED - PART I SMA (COMMON 1) (COMMON E) TYPE	ALL ENTITY OTHER THAN										
TOTAL CLAIMS	ON SEMESTIMY										
FOR	1906 1922										
TOTAL CHARGEABLE CLAIMS DEC.	ON MACHEN 130.00										
PROPERTORIAL // Colors 2 / 2	OR X318- /5/2										
MULTIPLE DEPONDENT CLASS PRESENT	49- OR X84- 1092										
• If the difference in column 1 is less than zero, error '9' in column 2	40. OR +200.										
	OR TOTAL 3377										
CLAIMS AS AMENDED - PART II Q'2-05 (Column 1) (Column 2) (Column 3) SM	OTHER THAN										
	110%										
	TE TICHAL MATE TICHAL	•									
Rist - 68 Mans - 104 - XS	De CON XS10e										
	900										
PERT PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
12/14/05 Non Compliant NE	000										
	I PEE . OR NOOT, FEE \$400 20 90	.00									
	TARRE TARRE										
AFTER PREVIOUSLY FACTOR SIGNAL FACT	TE TIONAL DATE TIONAL										
TOM - 08 Minus in 104 . MST	FEE										
Independent - 56 Minus on 16	01 200										
PIRST PRESENTATION OF MATIPLE DEPENDENT CLAM <	OR 284-										
•140	Col see										
V/ >/O. Winner	REE CA ASSIL FEE										
AFIER PREVIOUSLY PREVIOUSLY BOTTA PARTY	E TIONAL RATE TIONAL	•									
Total • 6 Manus • 10 4	TEE FEE	•									
Independent - 247 Mays - 1/2	OR X\$18=										
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLASS	OR X84=										
• If the entry is exhause 1 is into them the parties is exhause it with the second in	OR +250+										
* If the entry is educed 1 is less than the entry is educed 2, under "O" in educed 3, "If the "Algorial Humber Producing Paid For" by Their STACK is less than 20, great "De" The "Algorial Humber Producing Paid For" by Their STACK is less than 2, under "2," ADDIT. Fill ADDIT	OF ASSET (F)										
The Trighest Humber Productly Pall For' (I THIS STACE is less than \$1, year "\$1." ADDIT, FEE											

W. SENDER OF SE

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